



**U.S. FIELD HOCKEY ASSOCIATION WAIVER**

**Please return waiver to:  
USA Field Hockey  
1 Olympic Plaza  
Colorado Springs, CO 80909  
(719) 866-4567 phone  
(719) 632-0979 fax**

**PLEASE PRINT**

**Membership Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Membership Number:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

**City/State/Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Please provide as much information as possible when filling out this form. Missing information could delay your membership status.**

**Waiver and Release of Liability**

In consideration of being allowed to participate in any way in the United States Field Hockey Association programs, related events and activities, the undersigned acknowledges, appreciates and willingly agrees that:

1. I will comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
2. I acknowledge and fully understand that each participant will be engaging in activities that involve risk or serious injury, including permanent disability and death, and sever social and economic losses which may result not only from their own actions, inactions or negligence but the action, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, I accept personal responsibility for the damages following such injury, permanent disability or death; and,
3. I knowingly and freely assume all such risk, both known and unknown, even those arising from the negligent acts or omissions of others, and assume full responsibility for my participation; and
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, hold harmless the United States Field Hockey Association, its officers, officials, affiliated clubs, their respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies advertisers, and, if applicable owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releasees", with respect to all and any injury, disability, death or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise, to the fullest extent permitted by law.
5. I hereby grant permission to USA Field Hockey to use my photograph image or likeness in any or all official USA Field Hockey publications, film, video or official USA Field Hockey website(s) without further consideration or compensation. I understand that USA Field Hockey retains ownership of all photographs and images and any and all rights to the photographs or images in any format or medium.

**I have read this release of liability and assumption of risk agreement, fully understand its terms, and understand that I have given up substantial rights by signing it and sign it freely and voluntarily without any inducement.**

\_\_\_\_\_  
**Participant's Signature (even if under 19)**

\_\_\_\_\_  
**Date**

**This is to certify that I, as parents/guardian with legal responsibility for this participant, do consent and agree to indemnify and hold harmless the releases from any and all liabilities incident to my minor child's involvement or participation in these programs above, even if arising from their negligence, to the fullest extent permitted by law.**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**